

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MA</i>	<i>7881</i>	<i>115</i>
O.I.P.E. CLASSIFIER		<i>15</i>	<i>12100</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>7884</i>	<i>2-3-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	9/10/01
2	✓	✓	9/10/01
3	✓	✓	9/10/01
4	✓	✓	9/10/01
5	✓	✓	9/10/01
6	✓	✓	9/10/01
7	✓	✓	9/10/01
8	✓	✓	9/10/01
9	✓	✓	9/10/01
10	✓	✓	9/10/01
11	0	0	9/10/01
12	0	0	9/10/01
13	0	0	9/10/01
14	0	0	9/10/01
15	0	0	9/10/01
16	✓	✓	9/10/01
17	✓	✓	9/10/01
18	N	N	9/10/01
19	✓	✓	9/10/01
20	✓	✓	9/10/01
21	✓	✓	9/10/01
22	✓	✓	9/10/01
23	N	N	9/10/01
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If more than 150 claims or 10 actions  
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